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		•	Attorney Docket Nur	mber	1/1282				
DECLARA <sup>*</sup>	bmitted OR Submitted after Init th Initial Filling (surcharge		First Named Invento	r	Anderson, Craig				
PATFI			COMPLETE IF KNOWN						
			Application Number	10 / 079,703					
·		_	Filing Date	Febr	ruary 20, 2002				
□ Declaration Submitted	OR	✓ Declaration Submitted after Initial	Group Art Unit	To b	e assigned				
with Initial		Filing (surcharge (37 CFR 1.16 (e))	Examiner Name	Tob	e assigned				

**Examiner Name** 

As a below named inven	ntor, I hereby declare that:											
My residence, post office a	My residence, post office address, and citizenship are as stated below next to my name.											
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  Pharmaceutical combination of angiotensin II antagonists and angiotensin I converting enzyme inhibitors												
the specification of which (Title of the Invention)  is attached hereto OR												
_	02/20/2002	as Unite	d States Applica	tion Number or PCT International								
Application Number 10/0	79703 and w	as amended on (MM/DD/Y)	YYY)	(if applicable).								
amended by any amendme	eviewed and understand the ent specifically referred to about the disclose information which is	ove.										
certificate, or 365(a) of any America, listed below and ha	PCT international application	on which designated at lea checking the box, any forei	st one country of gn application fo	cation(s) for patent or inventor's other than the United States of or patent or inventor's certificate, ority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO								
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Additional foreign applica	ation numbers are listed on a	supplemental priority data	sheet PTO/SB/0	02B attached hereto:								
I hereby claim the benefit u	under 35 U.S.C. 119(e) of an	y United States provisional	application(s) lis	sted below.								
Application Number	I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.  Application Number(s) Filing Date (MM/DD/YYYY)											
			numbe supple	onal provisional application ers are listed on a emental priority data sheet SB/02B attached hereto.								

[Page 1 of 2]

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### **DECLARATION** — Utility or Design Patent Application

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As a named inventor, I hereby appoint the follow and Trademark Office connected therewith:	ing registered pract	titioner(s) t	to prosecute	this applicatio	n and to trans	act all business Place Cust	
	OR					Number Bar Label he	Code
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Name	Numbe			Nam			mber
Robert P. Raymond	25,089			n K. Pocc		45,016	
Alan R. Stempel	28,991			I. Datlow		41,482	
Mary-Ellen M. Devlin	27,928			thy X. Wit	kowski	40,232	
Anthony P. Bottino	41,629			A. Dow		46,124	
Additional registered practitioner(s) named of	n supplemental Re	gistered P	ractitioner In	formation she	et PTO/SB/02	C attached here	eto.
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Name of Sole or First Inventor:			A petitio	n has been	filed for this	unsigned inve	entor
Given Name (first and middle [i	f anyl)			Family	Name or S	ırname	
Craig	A	/	ANDERS	ON			
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Inventor's Signature						Date	15064 2
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**DECLARATION** 

# ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1\_ of 1\_

Name of Addition	nal Joint Inventor, if a	ıy:		A petit	on has been file	d for th	is unsigi	ned inv	entor				
Given Na	me (first and middle [if any	1)			Family Na	me or S	Sumame						
Salim			Υl	JSUF					_				
Inventor's Signature		_					Date						
Residence: City	Carlisle	State	Ontario	Country	Canada	Citizens	hlp	CA					
Post Office Address	48 Woodend Drive	8 Woodend Drive											
Post Office Address													
City	Carlisle	State	Ontario	ZIP	LOR 1H2	Country	Cana	ada	_				
Name of Addition	I Joint Inventor, if any:  A petition has been filed for this unsigned inventor												
Given Na	e (first and middle [if any]) Family Name or Surname												
Peter	SLEIGHT												
Inventor's Signature							Da	te					
Residence: City	Wheatley, Oxfordshi	re State		Country	England		Citize	nship	GB				
Post Office Address	32 Crown Road												
Post Office Address					<u> </u>		····						
City	Wheatley/Oxfordshi	re <sub>State</sub>		ZIP	OX33 1UL	Cour	<sub>itry</sub> E	nglan	d				
Name of Addition	nal Joint Inventor, if ar	ıy:		A petiti	on has been file	d for th	is unsigr	ned inv	entor				
Given Na	me (first and middle [if any	1)			Family Nar	ne or S	Surname						
Lutz		_	н	LBRICH	1								
Inventor's Signature				_			Da	te					
Residence: City	Wiesbaden State Country Germany Citizenship DE								DE				
Post Office Address	Hasengartenstrasse 20												
Post Office Address													
City	Wiesbaden	State		ZIP	65189	c	ountry	Gern	nany				

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#### Att rn y D cket Numb r 1/1282 **DECLARATION FOR UTILITY OR** Anderson, Craig First Named Inventor **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION 10 / 079,703 (37 CFR 1.63) **Application Number** February 20, 2002 Filing Date Declaration Declaration To be assigned OR Submitted after Initial Submitted **Group Art Unit** Filing (surcharge (37 CFR 1.16 (e)) with Initial To be assigned **Examiner Name** Filing required)

As a below named invento	r, I hereby declare that:			
My residence, post office add	dress, and citizenship are	as stated below next to my	name.	
I believe I am the original, fir- names are listed below) of th Pharmaceutical com converting enzyme	ne subject matter which is no subject matter which is no subject matter which is no subject to the subject matter which is no subject matter which is not subject matter which is	claimed and for which a pa	tent is sought or	
the specification of which is attached hereto OR	,	e of the Invention)		
was filed on (MM/DD/	7777) 02/20/2002	as Unite	d States Applica	tion Number or PCT International
Application Number 10/07	9703 and w	as amended on (MM/DD/Y	YYY)	(if applicable).
I hereby state that I have revi amended by any amendment I acknowledge the duty to disc	specifically referred to abo	ove.	·	•
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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
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Additional foreign application	on numbers are listed on a	supplemental priority data	sheet PTO/SB/0	02B attached hereto:
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#### Utility or Design Patent Application DECLARATION

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			Registered pr	actitioner(s)	name/	registrati	on number list	ed below	Label here	
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Robert P. Raymo			25,089			Susar	n K. Poccl	niari	45,016	
Alan R. Stempel			28,991			•	I. Datlow		41,482	
Mary-Ellen M. De			27,928				thy X. Witl	kowski	40,232	
Anthony P. Bottir			41,629		[		A. Dow	Winney (Personal)	46,124	
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Craig					ANI	DERS	ON			
Inventor's Signature				-,					Date	
Residence: City	Devonport/	Auckl	and State		C	ountry	New Zea	aland	Citizenship	AU
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## **DECLARATION**

### **ADDITIONAL INVENTOR(S)** Supplemental Sheet Page \_1\_ of \_1\_

Name of Addition	nal Joint Inventor, if an	y:	[	] A pe	titic	on has been file	d for thi	s unsigr	ned inventor		
Given Na	me (first and middle [if any]	)		Family Name or Surname							
Salim			YU	JSUF							
Inventor's Signature	Gusuy		_	,			3	Date	feror		
Residence: City	Carlisle	State	Ontario		Canada			Citizens	hip CA		
Post Office Address	48 Woodend Drive	Woodend Drive									
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City	Carlisle	State	Ontario	ZIP		LOR 1H2	Country	Cana	ada		
Name of Addition	nal Joint Inventor, if an	ıy:	[	] A pe	titic	on has been file	d for thi	s unsigi	ned inventor		
Given Na	me (first and middle [if any]	)			Family Nar	me or S	urname				
Peter	SLEIGHT										
Inventor's Signature								Da	te		
Residence: City	Wheatley, Oxfordshi	re State		Coun	try	England		Citize	nship GB		
Post Office Address	32 Crown Road										
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City	Wheatley/Oxfordshir	e State		z	IP	OX33 1UL	Coun	try E	ngland		
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Residence: City	Wiesbaden	State		Coun	try	Germany		Citize	nship DE		
Post Office Address	Hasengartenstrasse	20									
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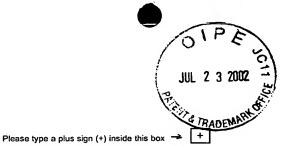
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DECLARA		I FOR UTILITY OR	First Named Invento	r	Anderson, Craig	
PATE		APPLICATION	COMPL	ETE II	F KNOWN	
(37 CFR 1.63)			Application Number		10 / 079,703	
<b>-</b>		_	Filing Date	Febr	ruary 20, 2002	
■ Declaration Submitted	OR	☐ Declaration Submitted after Initial	Group Art Unit	To b	e assigned	
with Initial Filing		Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name	To b	e assigned	

As a below named inver	ntor, I hereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name.											
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
Pharmaceutical combination of angiotensin II antagonists and angiotensin I											
converting enzyme inhibitors											
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### **DECLARATION** — Utility or Design Patent Application

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Craig				ANDE	RSC					
Inventor's Signature									Date	
Residence: City	Devonport/Auckl	and <sub>State</sub>		Cou	ntry	New Zea	aland		Citizenship	AU
Post Office Address	17 Cambria Road									
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City	Devonport/Auckland State		ZIP				Coun	try	New Zeal	and
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#### **DECLARATION**

#### **ADDITIONAL INVENTOR(S)** Supplemental Sheet Page \_1\_ of \_1\_

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	nal Joint Inventor, if ar				ᆫ	A petiti	on has been file				rentor	
	me (first and middle (if any	J)					Family Na	me or	Surnam	<del>)</del>		
Salim					YU	SUF						
Inventor's Signature		Date										
Residence: City	Carlisle	,	State	Onta	rio	Country	Canada		Citizen	ship	CA	
Post Office Address	8 Woodend Drive											
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City	Carlisle	] ;	State	Onta	ario	ZIP	LOR 1H2	Countr	Car	ada	····	
Name of Addition	nal Joint Inventor, if ar	Joint Inventor, if any:  A petition has been filed for this unsigned inventor										
Given Na	me (first and middle [if any	e (first and middle [if any]) Family Name or Surname										
Peter	SLEIGHT											
Inventor's Signature	Me	<u> </u>	, U							ate	06/24/0	
Residence: City	Wheatley, Oxfordshi	re s	State			Country	England		Citiz	enship	GB	
Post Office Address	32 Crown Road						. <u> </u>					
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Given Na	me (first and middle [if any	])					Family Na	me or	Surnam	e		
Lutz					HIL	BRICH						
Inventor's Signature										ate		
Residence: City	Wiesbaden State Country Germany Citizenship DE								DE			
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Case No.1/1282



□ Declaration

Submitted

with Initial Filing

**DECLARATION FOR UTILITY OR DESIGN** PATENT APPLICATION (37 CFR 1.63)

OR

Declaration

Submitted after Initial

Filing (surcharge (37 CFR 1.16 (e))

PTO/SB/01 (12-97)
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Attorney Docket Nun	nber	1/1282	1
First Named Inventor	r _	Anderson, Craig	
COMPLI	ETE II	KNOWN	
Application Number		10 / 079,703	
Filing Date	Febr	uary 20, 2002	
Group Art Unit	To b	e assigned	
Examiner Name	To b	e assigned	

#### required) As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Pharmaceutical combination of angiotensin II antagonists and angiotensin I converting enzyme inhibitors the specification of which (Title of the Invention) is attached hereto was filed on (MM/DD/YYYY) 02/20/2002 as United States Application Number or PCT International Application Number 10/079703 and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. Certified Copy Attached? **Priority** Foreign Filing Date Prior Foreign Application Country (MM/DD/YYYY) Not Claimed Number(s) Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. Application Number(s) Filing Date (MM/DD/YYYY) Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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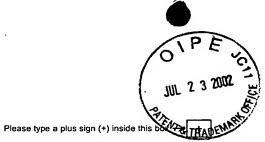
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#### Utility or Design Patent Application **DECLARATION** –

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.											
U.S. Parent Application or PCT Parent Number				Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)				
<del>- 124 17 1.</del>	Number				(MM/DD/TTT)					,	
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.											
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Par											
and Trademark Office connected therewith: Customer Number OR			ber						Place Customer Number Bar Code		
		Registered prac	ctitioner(s)	name/re	gistratio	on number list	ed below	, L	Label here		
N	Registration Name Number			Name					Registration Number		
Robert P. Rayı	mond	THURST			Susan K. Pocchiari				45,016		
Alan R. Stemp	el	28,991	•			Philip I. Datlow			41,482		
Mary-Ellen M.	•			Timothy X. Witkowski					40,232		
Anthony P. Bot	ttino	41,629			David	A. Dow_			46,124		
Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.											
Direct all correspondence to: Customer Number or Bar Code Label				28501 OR Correspo					ondence address below		
Name						-					
Address											
Address				<b></b>							
City				Sta	ite		ZIP				
Country		Telephon	e				Fax				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
Name of Sole or First Inventor:								ntor			
Given Name (first and middle [if any])				Family Name or Surname							
Craig				ANDERSON							
Inventor's Signature									Date		
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Additional inver	ntors are being named o	on the 1 sur	pplement	al Addit	tional li	nventor(s) s	heet(s)	PTO/	SB/02A attac	hed hereto	



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## **DECLARATION**

# ADDITIONAL INVENTOR(S) Supplemental Sheet Page \_1\_ of \_1\_

									<u>.                                    </u>	
Name of Additio	nal Joint Inventor, if an	y:			A petition	on has been fil	ed for this	s unsigr	ned inv	entor
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Inventor's Signature						F		Date		
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City	Carlisle	State	Onta	ario	ZIP	LOR 1H2	Country Canada			
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Peter SLEIGHT										
Inventor's Signature									Date	
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Name of Addition	nal Joint Inventor, if an	y:			A petitio	on has been file	ed for this	unsigr	ned inve	entor
Given Name (first and middle [if any]) Family Name or Sumame										
Lutz				HILE	BRICH				_	,
Inventor's Signature	(ultile	20	<u> </u>			-		Da	te	July 4
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Post Office Address										
City	Wiesbaden	State			ZIP	65189	c <sub>o</sub>	untry	Germ	nany

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Case No.1/1282